

Broadcast Equal Employment Opportunity Program Report

Licensee Name, Type and Contact Information

Discrimination Complaints

FRN: 0004121000	File Number: 0000116586	Submit Date: 06/26/2020	Call Sign: WAWE	Facility ID: 19221 City:
GLENDALE HEIGHTS	S State: IL			
Service: Full Power FM	Purpose: EEO Report	Status: Received Stat	tus Date: 06/26/2020	Filing Status: Active

General Information	Section	Question	Response
	Application Description	Description of the application (255 characters max.) is visible only to you and is not part of the submitted application. It will be displayed in your Applications workspace.	WAWE (19221) EEO filing for License Renewal 2020
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No

Licensee Information

Applicant	Address	Phone	Email	Applicant Type
EDUCATIONAL MEDIA FOUNDATION Doing Business As: EDUCATIONAL MEDIA FOUNDATION	DEVONA PORTER 5700 WEST OAKS BOULEVARD ROCKLIN, CA 95765 United States	+1 (916) 251-1600	EFILE@EMFBROADCASTING. COM	NFP

Have any pending or resolved complaints been filed during

alleging unlawful discrimination in the employment practices

this license term before any body having competent jurisdiction under federal, state, territorial or local law,

No

Contact Representatives	Contact Name	Address		Phone	Email		Contact Type
	MARY O'CONNOR WILKINSON BARKER KNAUER, LLP	1800 M. SUITE 80	GTON, DC	+1 (202) 383-3351	1000M	NOR@WBKLAW.CO	M Legal Representative
	JAMES TRAVIS FCC COMPLIANCE ENGINEER EDUCATIONAL MEDIA FOUNDATION	JAMES L TRAVIS 5700 WEST OAKS BLVD ROCKLIN, CA 95765 United States		+1 (916) 251-1600	EFILE@EMFBROADCASTING. COM		G. Technical Representative
Common Stations	Facility Identifier	Call Sign	City		State	Time Brokerage Ag	greement
	19221	WAWE	GLENDALE HE	IGHTS	IL	No	
Program Report	Section	Questic	on			Response	•
Questions	Discrimination Complain	hts Have a	ny pendina or reso	lved complaints	s heen filer	during No	

of the station(s)?

	Full-time Employees	Does your station employment unit employ fewer than five full-time employees? Consider as "full-time" employees all those permanently working 30 or more hours a week?	Yes				
Certification	Question	Question					
	trustee, authorized employe behalf of the party filing the R. Section 1.23(a), who is a she has read the document	The undersigned certifies that he or she is (a) the party filing the report, or an officer, director, member, partner, trustee, authorized employee, or other individual or duly elected or appointed official who is authorized to sign on behalf of the party filing the report; or (b) an attorney qualified to practice before the Commission under 47 C.F. R. Section 1.23(a), who is authorized to represent the party filing the report, and who further certifies that he or she has read the document; that to the best of his or her knowledge, information, and belief there is good ground to support it; and that it is not interposed for delay					
	Certified Date			6/26 2020			
	Certified Title		С	EO			
	Authorized Party Name		W	on Villiam Reeves			

Attachments